

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101576.473

FILING DATE

4-20-06

APPLICANT(S)

4-4-07

CLAIMS

20	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5		1				
6		1				2-
7		1				1-
8		1				2-
9		1				2-
10		1				2-
11		1				2-
12		1				4-
13		1				4-
14		1				4-
15		1				2-
16		1				2-
17		1				2-
18		1				2-
19		1				2-
20		1				2-
21		1				2-
22		1				2-
23		1				2-
24		1				2-
25		1				2-
26		1				2-
27	1		1			
28						
29	1		1			
30						
31						
32						3
33						3
34						
35						1
36						2
37						4-
38						2-
39						2-
40						1
41						4-
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	7	↓	7	↓		↓
TOTAL DEP.	27	←	67	←		←
TOTAL CLAIMS	34		74			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
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95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

38-②
3-①
20-④
6-③